



Municipality of Anchorage, Treasury Division
ALCOHOLIC BEVERAGES RETAIL SALES TAX
MONTHLY TAX RETURN
GENERAL INFORMATION AND INSTRUCTIONS

IMPORTANT NOTICE

Send original form to:
Municipality of Anchorage
Treasury Div., Alcohol Tax
632 W, 6th Ave., Suite 330
P.O. Box 196650
Anchorage, AK. 99519-6650

GENERAL INFORMATION

- The due date is the last day of the month following the reporting month.
- You must file a return even if there were no taxable sales.
- Keep a copy of your return for your records.
- Be sure the tax return has been signed and provide a day time phone number and email on the front of the return.
- Write your certificate number on your check or money order and make payable to: Municipality of Anchorage

TAX PAYER

If you have questions or need assistance completing this form, contact our office.

Municipality of Anchorage, Treasury Div., Alcohol Tax
632 W. 6th Ave., Suite 330
www.muni.org/AlcoholTax
907-343-6670
wwpt@anchorageak.gov

LINE-BY-LINE INSTRUCTIONS

- Line 1 Gross Receipts.** Enter the total gross receipts from the sale of alcoholic beverages. A business with multiple locations must complete the Multi-Location Schedule, form 41-007.
- Line 2 Tax Exempt Sales.** Enter the total receipts from tax exempt sales of alcoholic beverages. (AMC 12.65.040).
- Line 3 Total Taxable Sales.** (line 1 minus line 2.)
- Line 4 Tax Due This Month.** Amount of tax due for this month (5% of line 3).
- Line 5 Prior Tax Paid.** Enter the total amount previously paid for this applicable filing period. If filing an amended return, enter total amount previously paid for the applicable filing period.
- Line 6 Amount of Tax Due.** (line 4 minus line 5.)
- Line 7 Penalty. Failure to File Timely.** A penalty of 10% shall be incurred automatically when a retailer fails to file a tax return within seven calendar days following due date. If the retailer fails to file a tax return within sixteen calendar days following the due date, the penalty shall be increased automatically to 25% (AMC 12.65.270).
- Line 8 Penalty. Failure to Pay Timely.** A penalty of 10% shall be incurred automatically when a retailer fails to pay a tax return within seven calendar days following due date. If the retailer fails to pay a tax return within sixteen calendar days following the due date, the penalty shall be increased automatically to 25% (AMC 12.65.270).
- Line 9 Other Penalties and Costs.** These are imposed by Treasury based on audit findings or other enforcement actions.
- Line 10 Interest.** Applied at the rate of 12% per annum. Calculated as follows: number of days multiplied by .00033 per day multiplied by total sales tax due on line 4. (AMC 12.65.260).
- Line 11 Paper Filing Fee.** Unapproved paper filings are subject to an administrative processing fee of \$50* per filing (AMC 12.65.160B).
- Line 12 Total Amount Due.** Add lines 6, 7, 8, 9,10 and 11.



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Please Type or Print Clearly

MOA Certificate Number: Name of Retailer as shown on the Certificate of Registration: Year: Month:

Amended Tax Return

1.	Gross Receipts From Sales of Alcoholic Beverages:	\$	<input type="text"/>
2.	Tax Exempt Sales:	\$	<input type="text"/>
3.	Total Taxable Sales (line 1 minus line 2):	\$	<input type="text"/>
4.	Tax Due this Month (5% of line 3):	\$	<input type="text"/>
5.	Prior Tax Paid (see instructions):	\$	<input type="text"/>
6.	Amount of Tax Due (line 4 minus line 5):	\$	<input type="text"/>
7.	Penalty: Failure to File Timely: <input type="checkbox"/> 0% <input type="checkbox"/> 10% <input type="checkbox"/> 25%	\$	<input type="text"/>
8.	Penalty: Failure to Pay Timely: <input type="checkbox"/> 0% <input type="checkbox"/> 10% <input type="checkbox"/> 25%	\$	<input type="text"/>
9.	Other Penalties and Costs:	\$	<input type="text"/>
10.	Interest: Number of days <input type="text"/>	\$	<input type="text"/>
11.	Paper Filing Fee:	\$	-50.00*
12.	Total Amount Due (Add Lines 6,7,8,9,10 and 11):	\$	<input type="text"/>

*The Paper Filing Fee is being temporarily waived. The waiver will be in effect until e-file and e-pay modules are available for use by registered alcoholic beverages retailers. For more information regarding the Paper Filing Fee see Anchorage Municipal Code (AMC) 12.65.160B.

I certify under penalty of perjury that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return of all retail sales of alcoholic beverages during this tax period.

The Municipality's acceptance of this tax return does not imply that this tax return is complete, accurate, or in compliance with Anchorage Municipal Code (AMC) 12.65. The total amount due is subject to change after the verification process has been completed. You will be notified of any discrepancies found.

Signature of Authorized Representative: Printed Name: Title:

Date: Phone: Email: